

## State of Nevada FUNERAL AND CEMETERY SERVICES BOARD

501 Hammill Lane, Reno, Nevada, 89511 Phone (775) 825-5535 \* Email <a href="mailto:nvfuneralboard@fb.nv.gov">nvfuneralboard@fb.nv.gov</a>

## **Business Entity – List of Principals**

This form is used in conjunction with an application for a funeral establishment permit and must be completed if the applicant is a corporation, limited liability company or partnership.

	•			ŕ			
Applicant Information							
Name of applicant: (license if issued, will be issued in this name)							
rpe of applicant: Corporation Limited Liability Company (LLC) Partnership							
Identification of Principals Identify below all persons involved in the entity subject to disclosure requirements (e.g. all officers and directors of a corporation, all managers and members of a limited liability company, and all partners of a partnership).							
(1) Full legal name:	Date of			of Birth:			
Social Security #:	Title:		'				
Street Address:		City:		State:	Zip:		
Email Address:	mail Address: Phone Number:						
This person is (check all that are applicable):     Corporate Officer							
Signature of Principal (1):				Date:			

(2) Full legal name:		Date of Birth:						
Social Security #:	Title:							
Street Address:		City:			State:		Zip:	
Email Address:				Phone Number:				
•	applicable): orporate Directo tockholder contr		LC M than 1				C Manager ock	
Please check ONE answer to the	following question	ons:						
I am not subject to a court order	for the support of a	child.						
I am subject to a court order for compliance with a plan approved in the amount owed in the amount owed in the amount order for plan approved by the district attribute owed pursuant to the order.	red by the district pursuant to the orde	attorney or cer.  or more child	ren and	ublic a	igency enfor	cing f	the order for the with the order or	
Signature of Principal (2):					Date:			
(2) Full logal name:			Do	ato of	Dirth:			
(3) Full legal name:			Da	ate of	Birth:			
(3) Full legal name:  Social Security #:	Title:		Da	ate of	Birth:			
	Title:	City:	Da	ate of	Birth:		Zip:	
Social Security #:	Title:	City:					Zip:	
Social Security #:  Street Address:  Email Address:  This person is (check all that are a Corporate Officer C		r l	Phon LC M	ne Nu	State: mber:		C Manager	
Social Security #:  Street Address:  Email Address:  This person is (check all that are a Corporate Officer C	applicable): orporate Directo tockholder contro	r I	Phon LC M	ne Nu	State: mber:		C Manager	
Social Security #:  Street Address:  Email Address:  This person is (check all that are a Corporate Officer C Partner S	applicable): orporate Directo tockholder contro following questio	r I olling more ons:	Phon LC M	ne Nu	State: mber:		C Manager	
Social Security #:  Street Address:  Email Address:  This person is (check all that are a Corporate Officer C Partner S Please check ONE answer to the	applicable): orporate Directo tockholder contre following questic for the support of a	r I olling more ons: child.	Phon LC M than 1	ne Nu lembe	State: mber: er of the voting	g sto	C Manager ock	
Social Security #:  Street Address:  Email Address:  This person is (check all that are a Corporate Officer C Partner S  Please check ONE answer to the  I am not subject to a court order  I am subject to a court order for compliance with a plan approximation.	applicable): orporate Directo tockholder contro following questic for the support of a the support of one yed by the district pursuant to the orde the support of one	r lolling more ons: child. or more childing attorney or cer. or more child	Phone LC M than 1	ne Nu lembe	State:  mber:  er  of the voting  compliance agency enfor	g sto	C Manager ock	

(4) Full legal name:		Date of Birth:			
Social Security #:	Title:				
Street Address:		City:		State:	Zip:
Email Address:			Phone Nu	mber:	
Partner Si	corporate Director tockholder contro	olling more	LC Membe		C Manager ock
Please check ONE answer to the	<b>.</b>				
I am not subject to a court order I am subject to a court order for compliance with a plan approv repayment of the amount owed p I am subject to a court order for plan approved by the district atto owed pursuant to the order.	the support of one oved by the district operation to the order the support of one	or more childr attorney or o er. or more childi	ther public a	agency enforcing	the order for the e with the order or
Signature of Principal (4):				Date:	
(5) Full legal name:			Date of	Birth:	
(5) Full legal name:  Social Security #:	Title:		Date of	Birth:	
	Title:	City:	Date of	Birth: State:	Zip:
Social Security #:	Title:	City:	Date of	State:	Zip:
Social Security #:  Street Address:  Email Address:  This person is (check all that are a Corporate Officer Corporate Officer Security #:	applicable): corporate Director	r Lolling more	Phone Nu	State: mber:	C Manager
Social Security #:  Street Address:  Email Address:  This person is (check all that are a Corporate Officer	applicable): corporate Director tockholder contro following questic	r Lolling more	Phone Nu	State: mber:	C Manager
Social Security #:  Street Address:  Email Address:  This person is (check all that are a Corporate Officer Corporate Officer Security Please check ONE answer to the	applicable): corporate Director ctockholder contro following questic for the support of a	r Lolling more ons: child. or more childrattorney or o	Phone Nu LC Membershan 10% of the design and am in	State:  mber:  er LLC  of the voting sto	C Manager ock
Social Security #:  Street Address:  Email Address:  This person is (check all that are a Corporate Officer Corporate Officer Street Partner Street Please check ONE answer to the I am not subject to a court order I am subject to a court order for compliance with a plan approver	applicable): corporate Director ctockholder contro following question for the support of a the support of one of yed by the district of pursuant to the orde	r Lolling more ons: child. or more childrattorney or oer. or more childle	Phone Nu LC Member than 10% of their public aren and am Nu	State:  mber:  er LLC  of the voting store  compliance with the agency enforcing	C Manager ock  the order or am in the order for the e with the order or

(6) Full legal name:		Date of Birth:			
Social Security #:	Title:				
Street Address:		City:		State:	Zip:
Email Address:			Phone Nu	mber:	
Partner Si	corporate Director tockholder contro	olling more	LC Membe		C Manager ock
Please check ONE answer to the	<b>.</b>				
I am not subject to a court order I am subject to a court order for compliance with a plan approv repayment of the amount owed p I am subject to a court order for plan approved by the district atte owed pursuant to the order.	the support of one oved by the district of pursuant to the orde	or more childr attorney or o r. or more child	ther public a	agency enforcing	the order for the e with the order or
Signature of Principal (6):				Date:	
(7) Full legal name:			Data of	Birth:	
(7) Full legal flame.			Date of	Diruri.	
Social Security #:	Title:		Date of	<b>D</b>	
	Title:	City:	Date of	State:	Zip:
Social Security #:	Title:	City:	Phone Nu	State:	Zip:
Social Security #:  Street Address:  Email Address:  This person is (check all that are a Corporate Officer Corporate Officer Security #:	applicable): corporate Director	r L	Phone Nu	State: mber:	C Manager
Social Security #:  Street Address:  Email Address:  This person is (check all that are a Corporate Officer	applicable): corporate Director tockholder contro following questic	r L olling more ons:	Phone Nu	State: mber:	C Manager
Social Security #:  Street Address:  Email Address:  This person is (check all that are a Corporate Officer Corporate Officer Security Please check ONE answer to the	applicable): corporate Director ctockholder contro following question for the support of an	r Lolling more ons: child. or more childrattorney or o	Phone Nu LC Members than 10% of	State:  mber:  er LLC  of the voting sto	C Manager ock
Social Security #:  Street Address:  Email Address:  This person is (check all that are a Corporate Officer Corporate Officer Street Partner Street Please check ONE answer to the I am not subject to a court order I am subject to a court order for compliance with a plan approver	applicable): corporate Director ctockholder contro following question for the support of a the support of one of yed by the district a pursuant to the orde	r Lolling more ons: child. or more childrattorney or our. or more child	Phone Nu LC Membershan 10% of their public aren and am N	State:  mber:  er LLC  of the voting store  compliance with the agency enforcing	C Manager ock the order or am in the order for the